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### REPORT

OF

### THE LUNATIC DEPARTMENT

OF THE

BALTIMORE ALMS-HOUSE:

WITH

### AN APPEAL

ON THE SUBJECT OF

AN ASYLUM FOR THE INSANE POOR.

### REPORT

OF

### THE LUNATIC DEPARTMENT

FTHE

### BALTIMORE ALMS-HOUSE:

PRESENTED TO THE BOARD OF TRUSTEES, DECEMBER, 1840.

TO WHICH IS ADDED

### AN APPENDIX,

CONTAINING

### AN APPEAL

IN BEHALF OF

THE INSANE POOR OF MARYLAND.

BY ALEX. C. ROBINSON, M.D.

ONE OF THE ATTENDING PHYSICIANS.

BALTIMORE:

PRINTED BY J. ROBINSON.

1841.

DEAR SIR:

You will appreciate the motive which induces me to call your attention to the imperative necessity of some further action for the relief of the Insane Poor of our State.

In seeking to arouse sympathy in their behalf, by asking attention to the accompanying Report, and the statements presented in the short and hastily sketched appeal, which will be found in the "APPENDIX," I have obeyed the dictates of duty and of feeling. The nature and wants of Insanity are so well understood at the present day, and the subject now presented is one which so naturally and eloquently appeals to every heart, as scarcely to need the support of renewed arguments and facts. It can only be necessary to excite attention to the necessities of that class of our fellow beings who are rendered wholly dependant, because deprived of the guidance of reason, in order to interest every benevolent person in the community in an effort to have all our destitute Insane embraced within the widening circles of Maryland's benevolence and humane policy.

It is my wish to induce you to devise or co-operate in measures to provide all our pauper lunatics with suitable accommodations in the Maryland Hospital. The idea of asking the State to direct that Institution—which has been erected at a cost of not less than \$175,000, of which sum the State Treasury has supplied from fifty to sixty thousand dollars—to be wholly devoted to her Insane Poor, is suggested under the conviction that the present embarrassed condition of the State Treasury will forbid the large expenditure which must become necessary under any other immediate suitable disposition of them.

It is only in an Institution exclusively devoted to the management of insane individuals, that the friends and physician of the invalid can be encouraged to hope for success,—for there alone can the patients be judiciously classified, and an opportunity be afforded of so modifying the moral and physical treatment, as to render it appropriate to each case, and best calculated to afford relief.

Very respectfully,

Yours, &c.

ALEX. C. ROBINSON, M. D.

To Doctor Stall ... City.

### REPORT

OF

### THE LUNATIC DEPARTMENT

OF THE

### BALTIMORE ALMS-HOUSE:

Presented to the BOARD OF TRUSTEES, December, 1840, by ALEX. C. ROBINSON, M. D., one of the attending physicians.

### GENTLEMEN:

The arrival of the period appointed for your annual Report of the Condition and Conduct of this Institution—benevolently designed for the accommodation of the poor of our city and county—has suggested the propriety of presenting the accompanying statement relating to the insane inmates. To its various particulars your attention is solicited.

This communication is laid before you, in full confidence that you will regard it as entirely consistent with our relations to you in your official capacity, and as alone dictated by a sense of duty to that unfortunate class of our fellow beings whose mental wants should command public sympathy and care, at the same time, that their bodily

necessities are supplied at the public expense.

You will all probably coincide in the opinion, that the insane department is the only portion of this institution calculated to produce other than grateful impressions upon benevolent minds. From the want of a more suitable place for the accommodation of pauper lunatics, they are necessarily transferred into the alms-house—consequently, we have here presented to us the melancholy spectacle of cases of nearly all the varied forms of mental disease crowded in unclassified confusion. Yet most of the sufferers give some evidence, that high mental and moral attributes still linger about them, penetrating the gloom—"beams of original light, of which the mind amidst its thickest darkness is never shorn," which seem to dwell even in "the dark grandeur of the soul" of the raving maniac.

It is a well known fact, that the insane are often possessed of astonishing strength. This they are neither able properly to direct or control. It therefore becomes necessary that they should be deprived of facilities for escape, or opportunities of injuring themselves or others. Moreover, although medical skill is very important in the management of the peculiar disorder of their nervous systems, it is no

REPORT.

less necessary that, when confined, their apartments should be well warmed, lighted and ventilated;—their personal comforts studiously regarded, and their morbidly sensitive minds gently checked and soothed by experienced, intelligent attendants, whose "considerations of convenience" should always be subservient to the probabilities of cure. The architectural unfitness of this building for the accommodation of lunatics need not be argued. It was not originally designed for their habitation, and does not now afford the means of either secluding or classifying them, according to the intensity or peculiar features assumed by their maladies.

This report is made with the hope, that you will agree as to the necessity and propriety of again urging upon the city and county the cruelty of that false economy, which still refuses to take measures to place our insane poor where the architectural arrangements are so suited to the accommodation of lunatics, as to permit any advisable classification of the patients—while its internal arrangements afford humane, watchful, and capable nurses, with such appropriate amusements and occupations for the insane, as when aided by medical skill

may prove promotive of their comfort and cure.

### TABLE I,

SHOWING

THE NUMBER, WITH THE AGES, PERIOD OF ADMISSION AND CONFINEMENT, PRESENT CONDITION, &c.

OF

# THE INSANE WOMEN.

	**	bn	-	-		1	10	**	••	*	er
CONDITION HEREDITARY, PERIODICAL, PAROXYSMAL at present. With Remarks.	Recent. 1y 4m Not improved. Paroxysms of excitement; suspicious; harmless allowed to exercise in the yard.*	Do. noisy; inoffersive; confined to cell * Incessant raving; destructive; abusive; defying coercion; chained.*		Do. harmless; escaping, if permitted; con-	Hereditary; chain, dincell; paroxysms of ungov-	Do. periodical; inoffensive; confined.* Incessant raving; abusive; defying coercion; chain.	Inoffensive; silent; quiet; confined.* Violent conly during her paroysms of excitement;	Do, only during her paroxysms of excitement;	Do. only during her paroxysms of excitement;	Inoffensive, quiet; escaping, if allowed; confined.*  Paroxysms of excitement; generally quiet; inoffensive; melancholy; infirm. [cell.*]	Do. of ungovernable passion; chained in her
ONDITION at present.	improved.	eased.	Not improved.	3	**	Increased.	Not improved.	, ,	23	2 2	23
	Not	Increased.	Not			Incre	Not				
riod of nfine- nent.	y 4m	w 4	7			00 61		-	63	4	9
Pe Co	-	-		14	4	80	es es	C.1	C.1		
Recent or Period of Chronic; Confine- when rece'd, ment.	Recent.	- Chronic.	- Chronic.	Recent.	3	- Dev. sub't	Chronic.	33	3	Recent.	
		1 1	*	and domestic un-	de.		1 1	, "	-		1
70			,	ic v	pri	do.	-1 1			,	1
SE				nest	nud	i.					
) AU	on.			don	on s	piun	SSS	OH.			1
0	ecti	21	- 1	pu	passion an	do br	pine ef.	assi	xity	. 0	dity
SE	l aff	erty	ū,	ದ -	of p	l e aı	hap	f b	rple	qo	plex
SUPPOSED CAUSES	ntec	rop	atio		D BOI	anc	and	oo oo	s pe	tro	per
Su	opoi	of I	arb	do.	ger	psy	estic	gen	ion	ostic	sno
	isal	nten	Masturbation.	g	ndu	Epilepsy and do.	Domestic unhappir Poverty and grief.	npu	Religious perplexity.	do. do. Domestic trouble.	Religious perplexity.
7	I i	P.	-	Δ	1	H	P	1	R	P	R
Period of B Married of Admission Single.	Aug. 1839 36 Single. Disappointed affection	Sept. 68 Married Loss of property. 3 Aug. 1840 39 Single. Intemperance.	÷.	5 Dec. 1826 47 Widow	1836 25 Single. Indulgence of passion and pride.	2 2	9 Jan. 1837 50 Married Domestic unhappiness.	11 Nov. " 77 Single. Indulgence of passion.	22	13 Aug. 1840 63 Married	23
Age	36	89	56	47	25	39	50	11	34	80	4
d of	1838	1840	9 0	1826	1836	1831 28 1839 39	1837	99	22	1840	33
Perio	Aug.	sept.	4 May, " 26	Dec.	2	F May, 1831 28 S Oct. 1839 39	9 Jan. 10 Dec.	Tov.	12 Oct. " 34	an.	15 June, " 47
Numb'r	1	01 00	4	5	9	400	101	11	12 0	5 4	15 3
								1		*	

				, n	LP	ORT.					
Paroxysms of violence; usually harmless; noisy.* Periodical; mother 5 children; in paroxysms noisy, unavovernable; chained in cell.*	Inoffensive; quiet; confined to her cell.* Inoffensive; quiet; confined to her cell.* Paroxysms of excitement; harmless; grieves her confinement and absence from home.*	Subject to periodical paroxysms of violent excite-	Periodical; confined to cells; nearly idiotic. Confined to bed by debility; marasmus; nearly idi-	Inoffensive; confined to cells.*  Do. do. to cells.*  Lo. daily at work.  Do. do. imagines herself "Queen Vigillant, and destructive during periodical attacks;	Do. and destructive during periodical attacks;	Confined to her cell; paralysis. [sy; chained.* During paroxysms of violence, destructive and noi-Do. paroxysms of violence, destructive and noi-	Harmless; confined to her cell.*  Do. paroxysms of grief at absence from her children, confined to cell *	Constant raving; , unarrelsome; destroys clothes,	Do. raving; quarrelsome; destroyes clothes,	Quiet and inoffensive; destroys clothes; confined to	Periodically violent and destructive; chained in the Do. requiring to be confined to her cell; labors.
yrs. 11 m Not improved.	3 3 3	33	3 3	ff ff ff ff ff ff ff ff	99	Not improved.	3 3	Increased.	Not improved	8	* *
yrs. 11 m	101	4	10	1 7 10 13 2 9 11	,-	4 11	1 3	9	2 3	1 4	1 9
chronic.	Chronic. Recent. Chronic.	39 /	8	"" "" Recent.	**	3 3 3	Unknown Chronic.	Recent.	Chronic.	Recent.	Chronic.
Puerper	ction.		11	ide.	dty	ction			city		
1838 32 Married Domestic unhappiness.	Disappointed affection. Intemperance and epilepsy Disappointed affection.	do. do.	Epilepsy Unknown.	Intemperance Religious anxiety. Indulgence of pride. Disappointed affection. Unknown Intemperance	45 Married Religious perplexity.	Intemperance. Disappointed affection Unknown.	do.	Puerperal	Married Religious perplexity.	Unknown	Puerperal Epilepsy
rried	46 Single. 1835 57 Married 1839 48 Single.	3	2 2	Widow Single.	Married	Single.	1839 28 Married	Single.	Married	33	1840 25 Single.
Ma			P	322235	5	252	82.4	25	62	32	30
39 Ma	574	3 27	200	4000000	4.	90	6	0	00	0	0
1840 39 Ma 1838 32	1835 57 1839 48	1836 27	1835 37 1840 24	1839 42 1840 64 6 35 1827 22 1829 31 1840 35	33	1836 32 1840 41	1839	1840	1838	1839	1840
16 Jan. 1840 39 Ma 17 Aug. 1838 32	18 May, " 46 19 " 1835 57, 20 " 1839 48	** 1836 27	22 · ( 1835 37 23 · ( 1840 24	26 Mar. 1839 4 26 Feb. " 3 27 Oct. 1827 2 28 Jan. 1829 3 29 Nov, 1840 3		31 Dec. " 1836 32 " 1836 33 Jan. 1840	34 Sept. 1839 35 Jan. "	36 June, 1840 25	37 Sept. 1838 62	38 Aug. 1839 32	39 March, " 340 2

White women, 28; colered women, 12; total number of women, 40.

\*Capable of labor; unemployed; constantly complaining of the confinement; escaping, if released. † A sister of the preceding patient. Their brother was formerly an insane inmate of the house.

## TABLE II,

### SHOWING

THE NUMBER, WITH THE AGES, PERIOD OF ADMISSION AND CONFINEMENT, PRESENT CONDITION, &c.,

OF

## THE INSANE MEN.

CONDITION   HEREDITARY, PERIODICAL, PAROXYSMAL; at present   With Remarks.	Inoffensive; Do. Do. Homicide; h Demented; Do. Exercises in Easily provo Inoffensive; Do. Paroxysms O. Noisy; restl Inoffensive; Do. Do. O. Do. O. O. Do. O.	8 Not improved.   Periodical; in the interval inoffensive : labors.
CONDITION at present	Chronic. yrs. 18m Not improved.  Recent. 2 2 2  Chronic. 1 11  Recent. 1 8  Chronic. 1 8  Chronic. 1 8  Chronic. 1 4  Recent. 1 4  Recent. 1 4  Recent. 1 3 Improved.  Chronic. 1 4  Recent. 1 3 Improved.	Not improved
Period of Confine- ment.	61 22 22 18 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Recent or Period of Chronic; Confine- when rece'd, ment.		-   Chronic.   9
SUPPOSED CAUSES.	June, 1839   24   Single.   Unknown.	18 Feb. 1830 36 Single, Unknown.
Period of S Married	1849 54 Single. 1849 65 Married 1853 47 Single. 1853 52 Married 1853 54 Married 18540 34 Single. 1858 40 Single. 1858 56 Singl	Single.
Age Jo po	1839 24 1839 24 1839 24 1821 40 1840 34 1840 36 1840 34 1839 50 1839 5	1830 36
Perio Admi	1 June, 1839 24 3	Feb.
11 TAMES L	1	-

Unfit for labor. Harmless; timid; noisy; paroxysms of ungovern-	Homicide; paroxysms of ungovernable passion;	Inoffensive; allowed the range of the yard; infirm. Homicidal; suspicious; unsociable; chained in his	Inoffensive; nearly idiotic.  "" Do. noisy; able to labor; unemployed. Do. silent; do. do. Much improved. Harmless; noisy; allowed range of yard; unem-	Do. noisy; allowed range of yard; unem-	Do. physa. Melancholy; labors. Do. do. Morose; parexysms of dangerous violence; chain-	Do. paroxysms of dangerous violence; chain-	Harmless noisy; confined.* Quarrelsome; homicidal; chained in his cell.* Do. do.*
gence of Recent. 1 3 Not improved. Unfit for labor.	99	3 3 3	ff ff ff Much improved.	33	Not improved. Improved. Not improved.	3	3 3 0
1 111	C1	c7 —	11 4 0	63	0000	6	
yrs.	5		499		67	4	
Unknown Recent.	39.1	3 3	Chronic. Unknown Chronic. Recent.	33	Chronic. Recent	Chronic.	Recent. Chronic. Recent.
of.	te-		1 1 1 1				
0						1	
nd indulgenc	emper. nd mental exci	W-suit.	fection.		ative country.	•	risonment.
and indulg	do. and mental excite-		Epilepsy.  Disappointed affection. Inflammation of the brain.	do	Absence from native country Intemperance do. do	Unknown.	Intemperance. Epilepsy. Distress at imprisonment.
and indulg	.do.	Married Intemperance.	Single.	*	Married Intemperance.	Single. Unknown.	Married
and indulg		7	Single.		1838 35 " 1840 57 Married " 35 " "	1836 23 Single. Unknown	Married
ance. and indulg	.do.	22 (c. 1839 70 Married Intemperance	Single.	,, 61	35 " 35 " 35 "	33 Mar. 1836 23 Single. Unknown.	

\* Capable of labor; unemployed; constantly complaining of the confinement; escaping, if released. White men, 29; colored men, 7; total, 36.

Nore -- When referring, in the preceding Tables, to a patient's being "capable of tubor," we have alluded, alone, to the physical condition not forbidding bodily exertion. We have done this with the view of attracting attention, to what we believe to be true, viz., that, could such patients as still remain, have been early placed in some auspiciously conducted Lunatic Asylum, their mental derangement would have been so far cured, or amelionated, that a large proportion of them might have been greatly benefitted, and rendered happy by being daily engaged in some appropriate and interesting labor.

We also esteem it proper to remark, in explanation of the modes of personal restraint, we have stated to be used in some cases-that, as the arrangements of the building present few barriers to the escape of patients, and as our nurses are selected from among the temporary immates of the house-few of whom can be expected to possess those qualities of mind and manner, with that experience and appreciation of their arduous and pecudar duties, which combine to form an accomplished, courageous and proper nurse, for an insane individual - and as no other than the "coercive system" of treatment can be pursued, except in an Institution exclusively devoted to the management of mental disease,—and as there are only fourteen small rooms appropriated to the insane women, and twelve to the men, -two, three, or more are necessarily placed in the same apartment, and "chains," or some other form of personal restraint, seem to be rendered imperative to protect both patients and nurses.

In our remarks, we have also referred to the fact of a patient being "unemployed," because we design dwelling upon the injurious influence of continued idleness, and the great value of labor and interesting occupation in the treatment of the varied forms of Intellectual and Moral Insanity.

### SUMMARY.

### NUMBER OF PATIENTS.

Males, . Females,		-	-	36 40	Recent when admitted,
	Total,			76	Unknown, 8
	Total,	•			- manoving
					76
ra	RATION C	F THE	IR CO	NFIN	EMENT IN THE ALMS HOUSE.
Less	than one	vear.	_	_	31
From	one to fi	ve year	'S, -	-	34
From	five to te	n year	s -	-	8
From	ten to tw	enty y	ears,	-	34 8 3—76
OCCUP	ATIONS OF	THE	MEN.		FOREIGNERS.
Tanner,		_	_	- 1	Irish, 10
Sailor, -		-	-	- I	Germans, 6
Brushmaker		_	-	- 1	Italians, 2
Tinner,		-	-	- 1	
Stage actor,	-		-	- 1	English, 1
Shoemaker,		-		- 1	
Plasterer,				- 1	Total Foreigners, - 20
Farmers,		-		- 2	Citizens of other States, 11 Citizens of Baltimore county, - 13
Artists,		-		- 2	Citizens of Baltimore county, - 13
Merchants,		-		- 4	Citizens of Baltimore city, - 9 Other parts of Maryland, - 21
Carpenters,				- 5	Other parts of Maryland, 21
Laborers,		-		- 16	Unknown, 2
				36	Total, 76
				00	200019 = 10
AGES O	F LUNATIO	cs, DEC	. 1840	),	SUPPOSED CAUSES.
TT 3 00					T 4
Under 20 y		-	-	- 1	Intemperance, 23 Domestic afflictions, 4 Epilepsy and ill health, 6
From 30 to			-	- 17 - 27	Enilance and ill health
Prom 40 to					Policious foncticism normlevity
From 50 to		_	-	- 7	Religious fanaticism, perplexity, &c., (all females,) - 6
From 60 to				- 5	Disappointment, or loss of property, 3
From 70 to			_	. 3	Disappointed affection, 5
2 10111 10 0	, 00 40				Indulgence of temper and pride, - 3
				76	Puerperal, 3
					Produced or perpetuated by mas-
The you	ngest ma	le is 1	19; 0	ldest	turbation, 4
male 70. T	The young	gest fen	nale i	s 22:	Absence from home, 2
the oldest fe	emale 80.				Imprisonment, 2
Single, 4	7; marri	ed, 26	; wid	lows,	Imprisonment, 2 Unknown, 11
3; widower	'S, —.				_
					Total, 76

We have thus displayed the present actual condition of the insane department of the alms-house. We believe the preceding tables to be accurate. They have been hastily prepared, but with considerable labor; as it was necessary to collect the materiel from various sources;—no distinct or similar record of the insane paupers having heretofore existed. They have been added with the hope of lending interest to the subject, and affording tangible and legitimate data for

prompt action.

Heretofore, every practical scheme to promote the comfort of these unfortunates—consistent with the purposes and arrangements of the house, as a general asylum for the poor, in which point of view it will bear comparison with any other in the country, has been cheerfully adopted. Some of the insane are employed on the farm; such as are inoffensive and manifest no disposition to escape, are allowed in good weather, to exercise during the day in a small yard, designed for their exclusive use, under the late arrangement of the grounds, suggested by Mr. Maguire, the overseer. Another class, the furious, violent and ungovernable, or such as take advantage of every chance to escape, are kept constantly in their small apartments, under the charge of temporary nurses, selected from among the inmates of the house. There are two sets of cells-those most recently erected being eight feet by ten; those first constructed, ten by twelve. From their limited number, (fourteen cells being appropriated to the female lunatics, and twelve to the male,) and from the circumstance, that persons committed as vagrants are sent from the city and county to the alms-house, as a work-house, it is impossible to afford each lunatic a separate room; two, three or more are confined together. The cells in the basement of the building now being erected as an hospital for the colored women, will somewhat enlarge their accommodations; still they cannot be appropriately lodged;—and their number is added to by frequent admissions.

Among them almost "every form of insanity has a representative of its terrors;" yet how much less enviable must be the situation of the lunatics shut up in the alms houses and jails of the several counties of the state, or of such as remain chained in the hovels of poor relatives, who cannot be persuaded to entrust them to the charge of

strangers!

If a history of the mental sufferings, the medical treatment, and the present condition of the latter could be obtained, and tables similar to the preceding, of the insane in this institution had been annually prepared, what a melancholy record would be presented of cases "not improved,"—most unpleasantly contrasted with the statistical reports of the lunatic asylums of this country, as well as of Europe! These incontestibly prove, that, if insanity do not yield with more promptness than ordinary diseases, at least as large a proportion of recoveries will occur in recent cases, under an appropriate medical, moral and intellectual treatment, as from any other acute disease of equal severity;—something more than ninety per cent. of recent cases, and from fourteen to twenty-five per cent. of old cases having been cured.

This encouraging truth, together with the fact, that the chances of relief diminish nearly in a geometrical ratio with the period of duration of the attack, shows the importance of an early application for

medical aid, and cannot be too generally known.\*

However, although time so rapidly diminishes the chances of recovery, and the difficulties of restoring reason, when once dethroned are very great, requiring all the curative means suggested by science to benevolence—yet the recorded instances of restoration in cases long pronounced incurable are sufficient to prevent us from despairing in any instance, unless organic change of the brain have occurred. "A case is stated by Pinel, of a lady who had been maniacal for twenty-five years, suddenly recovering her reason."

Satisfied of the easy curability of insanity if attended to early, of the important aid to be derived from medicinal means, assisted by a moral treatment, and an intellectual discipline judiciously directed by capable and devoted attendants-it becomes a point of anxious enquiry in every public receptacle of the insane-" what proportion of insane patients are restored to the full possession of their reason?" and "what proportion are amended or relieved in cases where an entire restoration to reason has not been accomplished!" If the results of experience in the treatment of insanity during past years in this institution had been distinctly reported, we are sure, that the data supplied would only corroborate the statements in other sections of our country, where it has been proved, that few or no instances of recovery occur to cheer us among the many subjected to confinement and idleness, and to all the unfavorable, irritating and provoking influences of the "coercive system"-which is so happily calculated to develope "the mind's various and extensive capabilities of pain." The insane mind not recognising the justice or necessity of it, feels with morbid distinctness any form of personal restraint, and in the absence of occupation or amusement to relieve the irksomeness of confinement, it grows unhappy, discontented and restless; unless soothed, its unfavorable influence is manifested by functional disorder; sleep and appetite are banished, the illusions are aggravated, the idea of outrage, indignity and privation engrosses the mind, till lashed into fury, its ravings only cease with physical exhaustion.

"To him whose mind is alienated, a prison is a tomb, and within its walls he must suffer as one who awakes to life in the solitude of the grave. Existence and the capacity of pain are alone left him. From every source of pleasure and contentment he is violently sequestered. Every former habit is abruptly broken off. He is alike

<sup>\*&</sup>quot;The ratio of curability of cases, which have existed less than three months, is nine in ten; and eight and a half in ten when it has existed under twelve months; on the other hand of three hundred and eighteen cases, which had fallen under the care of Sir William Ellis, at the York West Riding Asylum, and which had existed from one to thirry years, only twenty-six were cured. M. Esquirol, one of the greatest living authorities on the subject of insanity, has asserted, that after the disease has passed the third year of duration, the probability of cure is scarcely more than one in thirty. Such, too, have been the general influences deduced from the results of the several admirable insane establishments of our own country."—See second Appeal to the people of Pennsylvania, page 21.

removed from all the occupations of health, and from those delicate acceptable attentions so soothing in sickness. The monotony of his confined apartment, the uninvited companionship of those who neither pity nor soothe him, the unavoidable recurrence of causes of annoyance and provocation, are but too well calculated to derange the vital functions of the body, and thus aggravate the derangement of his mind. On every side is raised up an insurmountable barrier against his recovery. Cut off from the charities of life, endued with quick sensibilities to pain, and perpetually stung by annoyances, which, though individually small, rise by constant accumulation to agonies almost beyond the power of mortal sufferance; if his exiled mind in its devious wanderings ever approach the light by which it was once cheered and directed, it sees every thing unwelcoming, every thing repulsive and hostile,

and is driven away into returnless banishment.

From the absence of suitable institutions among us, the insane have been visited with a heavier doom than that inflicted upon the voluntary contemners of the law. They have been condemned as no criminal ever was condemned, and have suffered as no criminal ever has suffered. The code by which they have been judged, denounces against them the penalties due only to crime, while it is unmitigated by any of those merciful provisions, which, in our penal code attemper justice with humanity. Even when a criminal stands convicted of perpetrating the most atrocious crime, the benignity of the law accompanies him to the solitude where he is to expiate his offence. He is not only comfortably clad and warmed, and fed at the expense of the state which inflicts his punishment, but he is supplied with the means of moral renovation, and when those proofs of penitence and reformation are given, which it is in his own power to furnish, the laws relent and authorize the remission of his sentence. But though the insane have been made fellow prisoners with the criminal, they have suffered, if not from the privation of every comfort for the body, at least from the absence of every solace for the mind. Yet why should a man be treated even as a criminal, who, by universal consent is incapable of crime? We understand what is signified by retributions for guilt, but to speak of retributions for insanity, does violence to every feeling of humanity and dictate of conscience. Yet this wretched class of our fellow beings whose only offence is what others justly regard as amongst the direct of calamities—as incapable of moral guilt as unhappily they are of moral consolation, have been regarded by our laws as though they were rather the objects of vengeance than of commiseration. And were a system now to be devised, whose express object it should be to drive every victim of insanity beyond the limits of hope, it would scarcely be within the power of a perverse ingenuity to suggest one more infallible than that, which, for so many years has been in practical operation amongst us. That system could advance one paramount claim to preference. Its experiments have been numerous, and have scarcely ever failed in rendering the most favorable cases of insanity incurable. This practice reacts upon the community by which it is sanctioned. To say nothing

of the amount of human suffering, it has caused, it cannot be doubted that, with appropriate treatment, one half at least of all the lunatics, whose support must now continue to be a burden upon the state while they live, might have been restored, and this half might have added as much to the resources of the state, as the other would have subtracted from them."\*

The result would be far different if the insane paupers could be properly classed, and treated on the "non-restraining principle," at the same time subjected to a well devised medicinal course, calculated to preserve or restore bodily health, with the assistance of cleanliness, exercise, air, and suitable diet; while mercy and kindness characterize the deportment of their nurses, who should invariably be persons of respectability, with experience, benevolence, dignity, patience, anxious watchfulness, and possessed of a just conception of their peculiar duties. "As far as in any manner possible, all causes of mental disquietude should be excluded by substituting persuasion for force, by practising forbearance, mildness and all the nameless offices of humanity, and by imbuing in every practicable way, the minds of the patients with a new set of pleasing, cheerful, grateful and benevolent emotions. In fine, the whole scheme of moral treatment is embraced in a single idea—humanity,—the law of love—that sympathy which appropriates another's consciousness of pain, and makes it a personal relief from

suffering, whenever another's sufferings are relieved."

This cannot now be termed a novel mode of treating insanity. It was introduced into France upwards of fifty years ago, with triumphant success, superseding the coercive system, the standard remedies of which, industriously applied, "have precipitated thousands of intellects from a condition of temporary danger to one of irretrievable ruin." When the functions of the brain and general nervous system are disordered, resulting in irregularity of action and chronic delirium—can fetters, cheerless confinement, absence of occupation, and unceasing tumult, recall harmonious action, and assist the recuperative energies of the mind to restore "an immortal nature to the capacity of virtue, and the enjoyment of happiness?" Every enlightened mind—every humane heart will respond in the negative. Then why is our state so backward in providing a home for her destitute insane, where medical skill may unite with intelligent benevolence in the good work of allaying the morbid excitement of the brain, and regulating the disordered actions of a chaotic intellect, recalling reason, and re-awaking all its natural sympathies? To this class of her citizens, she is in long arrears. "One of the strongest if not one of the first principles of social obligation arises from the necessity of relief, and the ability to relieve. And when does a man so urgently require the light of others to direct his steps as when he wanders in darkness? When does he stand in such extremity of need of the knowledge and

<sup>\*</sup>See Report of Commissioners appointed to superintend the erection of a Lunatic Asylum, at Worcester, January 4, 1832.

<sup>†</sup>See first Annual Report of Trustees of the State Lunatic Asylum, at Worcester, Mass., December, 1833

guidance of his fellow men as when his own mind is a wild chaos, agitated by passions which he cannot quell, and haunted by forms of terror, which the living energy of his nature is perpetually calling into being, but cannot disperse? When does he so strenuously demand their succor, as when his own soul is like a living wound, and he has lost all power of distinguishing between the sources of healing and of torture? If the insane have done nothing to forfeit the claim which men who suffer have by the law of nature, upon men who are able to prevent that suffering, they should be treated, not with a sole regard to the security of others, but with special reference also to their own misfortunes, and in a manner adapted to shorten their duration, or where that is impossible, at least to mitigate their severity. the pulic good imperiously demanded the coercion of the insane, it would not be just to east them into hopeless imprisonment, thereby making the cause of their confinement remediless, and the confinement itself terminable only by the death of the sufferer. In its practical operation, such a system is a direct consignment of human beings to the long protracted and mysterious horrors of madness."

On the other hand, what has been the practical operation of the treatment opposed to this system of coercion, and which in obedience with the laws of humanity, substitutes mildness and patient persuasion for harshness and force—liberty, exercise, and occupation for confinement, inactivity and idleness? We believe we cannot better serve the class of lunatics, whose claims we wish to urge, in depicting the results which have been realized from this change, than by again quoting the language of one, whose eloquent pen has so vividly depicted the inevitable horrors of insanity, when neglected or deserted, and uttered such rich appeals in behalf of those whose feelings and emotions, at least, may be soothed and subdued, even when the integ-

rity of their intellects cannot be restored.

"However deeply all our better feelings may be moved by the reflection that so many of our fellow beings, under the auspicious influences of this institution, have already been restored to reason and returned to bless the families and friends, who, under the former coercive system of treatment, would have mourned their loss 'without hope;' yet the ameliorated condition of such as have not been recovered, we regard as a subject of equal congratulation among men, and gratitude to heaven. No one, who has not actually seen from time to time, the inmates of the hospital, can comprehend the extent of the change which has taken place in every external indication that marks the physical and moral condition of a human being. Many who, in their paroxysms, used formerly to wound and lacerate their own persons to a degree that threatened life itself, now habitually exercise an ordinary degree of prudence in avoiding the common causes of annoyance and accident. Not less than one hundred of those brought to the hospital seemed to regard human beings as their enemies, and their first impulse was to assail them with open or disguised force. Now there are not more than twelve who offer violence. Of forty persons who formerly divested themselves of clothing, even in the most inclement seasons of the year, only eight do it now. Through all the galleries, there is far less susceptibility to excitement, more quietude, more civility and kindness exercised towards each other. The wailings of the desponding, and the ravings of the frantic are dispelled. The internal change is legible upon the countenance. With the insane it is emphatically true, that the dark shadows of the mind are visibly projected upon the face. Hence, from the alteration which has in many instances occurred in the outward aspect, amounting to almost a change in identity, there may be inferred a corresponding alteration of the condition within. The deep lines of anguish have been obliterated or softened, whose sharp engravings were begun many years ago in despair. The wide circle and heart-sickening variety of horrors, exhibited by the inmates when first brought together, have been greatly

reduced in extent, and mitigated in quality."\*

Among the means conducive to so favorable a result, no one is more important than the principle of never allowing a patient to contime idle, if at all in a condition of general health admitting his engaging in light or laborious occupations. The mental revulsion induced by labor, prevents the morbid illusions and the real or fancied sufferings from wholly engrossing the attention. Gardening, farming, or mechanical operations—particularly if the patient has been accustomed to them, encourages cheerfulness and contentment, promoting at the same time refreshing sleep and appetite—the health becomes improved, and the mind invigorated. The anticipation of the benefits of labor, or the contemplation of its results is also effectual in awakening a feeling of satisfaction, and self respect, which greatly aids the patient in controlling any disposition to violence and indecency, and in banishing unpleasant impressions, and feelings of irritation and degradation. Of course during the vascular and nervous excitement frequently existing in the early stages, rest, seclusion, and quiet will best allay diseased irritability of body and mind; but as this disappears, exercise and employment adapted to the condition of the patient, promotes convalescence and strengthens the mental and bodily powers, greatly aiding the medicinal treatment in removing the functional derangement in that portion of the physical system—the brain and nerves, which causes insanity.

We might also quote evidence to show the beneficial influence of introducing Sabbath services within the confines of an asylum, judiciously arranged and conducted; and that a large proportion of the patients, pleased if allowed to attend, behave with great propriety. But we have already far exceeded our prescribed limits, and must resign the subject to the charge of a more able and experienced advocate.

It cannot be necessary to dwell longer upon the uncharitableness of sending our insane paupers into alms houses, where it is impracticable to command the varied and nicely adjusted means best calculated to recall, and re-establish physical and mental health. What inconceivable good might have resulted from the expenditure of a comparatively in-

<sup>\*</sup> First Annual Report of the State Lunatic Asylum, Worcester, Mass. Dec. 1833.

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considerable sum years ago, in the establishment of a state lunatic asylum!—a large proportion of those, who must now be a burden upon the community as long as they live, might have been restored to their families, to happiness and to usefulness.

When instity was scarcely looked upon as a legitimate subject for curative treatment, alms-houses were selected as suitable places for the safe confinement of the unfortunate subjects of it. But are they to be so regarded now? We trust not.—Convinced that the want of a well endowed Pauper State Lunatic Asylum is a serious evil, the magnitude of which should be pressed upon the notice of our people and our government—we venture thus to entreat you earnestly to plead for its removal;—feeling assured, that the intelligent body of a people, whose enterprize and determination to do all in their power to promote the true and permanent interests of their state, and fellow-citizens at large, have induced the expenditure of millions in rail roads, canals, and various other internal improvements, will promptly respond to the cry for relief, and advocate the desired provision for their destitute insane, if made to comprehend its necessity. Such an institution, assuming a high rank among our state enterprizes, would prove a blessing to a helpless, and heretofore neglected class of our people, and continue an admired monument of her benevolence.

Note.—Within the last year an insane patient, confined at the Alms House by order of the County Court—before which he had been tried for homicide—was found to be so entirely harmless, as to admit of his being employed to labor at his former avocation as a gardener. Upon reaching the open air,—when first permitted to escape from the monotony of his limited apartment,—he could not conceal his astonishment and delight at the new scene thus suddenly presented to him; but, walking around and around the extensive buildings, with a step to which pleasurable emotion seemed to lend elasticity, continued to

exclaim-" how wonderful"-" how beautiful."

Many affecting incidents are recorded of the effects of their liberation from fetters and confinement, on furiously maniacal patients. After the celebrated Pinel—the French reformer in the treatment of insanity—had obtained the consent of the commune of Paris, in 1792, to try his system on the insane confined at the Bicetre, in the course of a few days he removed the chains from fifty-three lunatics. The first one released was an English captain, who had been confined there for forty years. A disposition naturally violent had been exasperated by the rigours of his confinement, and the neglect of his attendants,—one of whom he had killed in a paroxysm of fury, by suddenly striking him upon the head with his heavy manacles. Pinel entered his cell alone—promised to liberate him upon his pledge to regard the rules of the house, and behave with propriety;—telling him, at the same time, that he had six assistants at command, who would replace him in his cell, if he misbehaved. The poor man was incredulous—but when he actually found the manacles removed from his limbs by his humane physician, and his hands only muffled as a matter of precaution, he promised to obey Pinel in every particular. His first efforts to stand failed—so long had his limbs been hampered—but in a short time, poising himself, he staggered towards the door. "His first action was to look at the sky, and exclaim, in ecstasy—'how beautiful.' Through the whole

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day he ran about, ascending and descending the stairs, and constantly repeating the exclamation, 'How beautiful! how good!' That night he slept tranquilly, and had no paroxysms of fury during the two additional years he passed in the Bicêtre."

Among the earliest released was Chevingé-a man of prodigious strengthwho, after having been dismissed from the French Guards for drunkenness, was reduced by shame and want to such mental depression, that his intellect became disordered. He imagined himself a general, and attacked all who did not admit his assumed rank. His furious excitement rendering him dangerous, it became necessary to remove him to the Bicêtre. For ten years he had been closely confined and heavily chained—his strength rendering him an object of fear to the servants, while is fury at the cruelty of his confinement had kept his naturally good disposition completely masked. The mere promise of Pinel soon to liberate him appeared to sooth his mind. "Never in the whole history of the human intellect was there a more sudden and complete revolution" than in Chevingé, when freed from the chains, which had kept him degraded and irritated during the prime of his life. Ever afterwards, he was noted for his grateful and proper deportment. "Often, in the difficult times of the Revolution, he saved the life of Pinel, and on one occasion rescued him from a band of miscreants who were conducting him to the "Lanterne," owing to his having been an elector of 1789. During the time of famine, he left the Bicêtre every morning, and returned with supplies of provisions, which gold could not at that time procure. His whole life was one of perpetual devotion to his liberator."

### APPENDIX.

[The following "Appendix" was attached to a Report on "Delirium Tremens," lately prepared by Dr. Robinson, and published in the fourth number of the Baltimore Medical and Surgical Journal. It is inserted here, because it has direct reference to the subject-matter of the preceding Report.]

THE gentlemen of the Board of Trustees of the Baltimore Alms-House, anxious to ameliorate the condition of the lunatic inmates, and convinced of the impracticability of instituting such a moral and physical treatment as is best calculated to restore them to health, unless in an asylum exclusively devoted to the Insane, have already called the attention of the City and County authorities to the necessity of some more appropriate disposition of them, and have directed a few additional apartments to be prepared for their present accommodation. We are pained to acknowledge the inevitable necessity we have sometimes experienced from the crowded condition of the cells and the large number of lunatics, of treating our Delirium Tremens patients in the immediate vicinity of, if not in the same apartment with, Insane patients.

Seventy-six lunatics are now confined in this Alms-House alone :-twentynine white males; twenty-eight white females; seven black males; twelve black females, besides twelve idiots. A portion of these are foreigners; some are individuals from other states, and some from other counties of this state, who find their way, or are sent to Baltimore totally unprovided for, and conse-

quently have no other asylum but the Alms-House.

The whole number in the State of Maryland, including those confined at private houses, and such as continue immured in the county poor-houses and jails, will soon be reported by the Marshal. If the proportion to the entire population approximate that in other states, the new census will show a large class of indigent beings, afflicted with a malady now known to be curable in the proportion of ninety per cent. of recent cases, under an early and judiciously directed physical and moral treatment. Yet the sufferers, whose only crime is their poverty and disease, are treated as if unworthy of sympathy; forgotten in their prison-houses, where they are allowed little beside "the poor privilege to breathe;" chained like convicts or associated with vagrants, as was formerly the case in all parts of Europe, as well as in every portion of the United States, when, under the errors of a false philosophy and the force of prejudice, insanity was viewed as an infliction, the attempted removal of which was deemed idle if not presumptuous.

When will Maryland arouse to the necessity of following the benevolent example of most of her sister states, in providing some suitable asylum for her Insane Poor,—where they may enjoy those comforts and conveniences, those occupations and amusements, which are acknowledged to be indispensable to alleviate, if not to cure? In such an asylum how many would be restored to "mental existence" and usefulness, whose hallucinations are now aggravated,the disordered functions of their brains goaded to excess, resulting in organic change and permanent fatuity, by being uncomfortably kept in crowded apartments, subjected, perhaps, to some form of personal restraint to protect them from each other; deprived of the benefits of exercise, amusement and occupation-a condition as well calculated to induce insanity in a healthy individual,

as to render it perpetual when once manifested.

Science and philosophy have triumphantly proved the curability of insanity if attended to early; and the people of Maryland cannot continue deaf to the claims of this most unfortunate class of her citizens, and refuse to aid their escape from the justly dreaded deprivations of permanent insanity, and consequent confinement in the comparatively comfortless apartments of Poor-Houses, and the ill-ventilated, grated and cheerless cells of county jails, identified with

felons and vagrants.

Will Maryland allow herself to be longer,—now almost half a century,—behind France, Italy and Englend; indeed, nearly all Europe, and many years behind Maine, Massachusetts, New-Hampshire, Vermont, Connecticut, New-York, Virginia, South Carolina, Tennessee, Kentucky and Ohio, in the good work of providing for her pauper lunatics? Will she still allow them to remain shut up, two, three, four or more together, without even the poor consolation of being alone in their misery, and necessarily subjected to constantly recurring causes of irritation, under which their cure forms the exception rather than the rule?

The destitute condition of the insane poor of our state is, in truth, a dark blot upon her otherwise fair escutcheon, which, we trust, will soon be removed. Instructed by the experience of her sister states, that on the score of economy it is her interest, we hope she will follow the clear dictates of policy, if not of pity, and no longer refuse to make proper provision for this class of her citizens.

Bountifully providing for the destitute widow, orphan and invalid, for the mute and the blind, can she permit her soil to continue one of the few spots where the poor lunatic is forgotten amidst her public charities, and left destitute of the comforts of existence, and every means of mental tranquility! We hope not. But regarding the partial provision made two years since, in 1837-8. by the appropriation of \$30,000 to the Maryland Hospital\* as an earnest of her future disposition to afford adequate succour to the helpless sufferers of so justly dreaded a species of calamity, who imploring plead to be released through her agency, from what they believe to be unjust and unnecessary—therefore cruel and irritating confinement,—we fervently pray that at an early day an asylum and a home may be given by the state to every destitute subject of mental disease within her limits.

\*On the 3d of April, 1839, a resolution, offered by Dr. Stephen Collins, a Delegate from Baltimore city passed the Legislature of Maryland, in favor of the Maryland Hospital, by which \$30,000 were appropriated for its completion,—distinct reference being had in making the improvements, to its exclusive use as alunatic asylum. This resolution contains the following clauses: "Provided, that one half of said institution shall hereafter be appropriated to the accommodation of pauper lunatics of this state, who shall there be accommodated and treated at the expense of the county so sending such lunatic paupers; provided the same shall not exceed one hundred dollars for each pauper lunatic so sent."

This appropriation has proved totally insufficient to supply the necessities of the pauper lunatics of the state. Their number is estimated at not less than two hundred. The sum of one hundred dollars, to be paid by the counties to the hospital, is too small to bear expenses. It has been stated by Dr. Stevart, President of the Maryland Hospital Board,—a statement corroborated by the reports of the most economically conducted institutions at the north,—that the food, nurse-hire, medical attendance and medicines of each patient cost one hundred dollars; and that clothing and fuel would cost twenty-five dollars additional. This loss the institution bears out of the small profits derived

from the private patients.

It seems, however, that the counties very seldom avail themselves of this provision, preferring to continue their unfortunate lunatics in their poor-houses or jails, at an expense calculated not to exceed fifty dollars, with scarcely a chance afforded of recovery,—rather than incur the additional expense imposed by placing them at a hospital appropriated to the Insane; where alone, if not restored to health, their condition may be so improved by a judicious course of moral government, seconded by cheerful exercise and healthful occupation, as to render them once more comparatively contented and useful. By this ill-judged economy, insanity is aggravated, and the sufferers continue during life, totally helpless and dependant. Whilst had their home been at a lunatic asylum, their moral, mental and physical capacities would be so directed as to be conducive to their individual support, simultaneously with the improvement of their health and condition.

Note — According to the census of Maryland, for 1840, the total population is 467,567.

Number of Insane and Idiots at private charge, 209 whites and 97 colored.

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An eloquent apeal has again been made in behalf of the insane poor of our sister state, Pennsylvania, which, we doubt not, will prove effective, so well is it calculated ro re-enlist the active sympathies of her enlightened philanthropists in behalf of those who are no longer regarded, and should be no longer treated, as outcasts. Her chief magistrate, as her organ, in withholding his sanction, (the necessity of which he deplored, but thought imperious, from the exhausted condition of the treasury,) from a bill making provision for the numerous Insane Poor of that extensive commonwealth, which was passed by the Legislature two years ago, has avowed it to be her religious duty to provide, at her earliest ability, for the removal of so manifest an evil from amidst her people. And it being now shown to be her interest, on the score of economy\* alone, Pennsylvania, we are sure, will not neglect this "Second Appeal" And for the sake of the character of our native state, we hope that Maryland will not be behind her in the benevolent undertaking and Christian duty To induce union and efficient action in order to effect so necessary and desirable an object, we earnestly appeal to the state and city authorities, as well as to every philanthropist, and every Marylander. For who, in this enlightened period, so characterized by wisely bestowed and extended charities, will acknowledge himself without sympathy for, and consent longer to forget, the Insane Poor.

> "Who that bears A human bosom hath not often felt How dear are all those ties which bind our race In gentleness together, and how sweet Their force, let Fortune's wayward hand the while, Be kind or cruel."

\* See a second appeal to the people of Pennsylvania, on the subject of an asylum for the Insane Poor of the commonwealth. Philadelphia, 1840. [Reported by a sub-committee, through their chairman, Dr. Dunglison.]

The following is the estimate prepared by a distinguished writer on insanity, M. BRIERRE DE BOISMONT, of the proportion of insane in different countries, as given in his recent work on the influence of civilization on the development of insanity. He conrecent work on the influence of civilization on the development of insanity. He conceives the disease to prevail, as a general rule, in a direct ratio with the state of civilization of a people.—State of New York, 1 in 721; England, 1 in 783; Scotland, 1 in 563; Norway, 1 in 551; France, 1 in 1,000; Districts on the Rhine, 1 in 1,000; Belgium, 1 in 1,014; Holland, 1 in 1,046; Italy, 1 in 4,879; and Spain, 1 in 7,181

The proportion in the large cities are stated as follows:—London, 1 in 200; Paris, 1 in 222; Milan, 1 in 242; Florence, 1 in 335; Turin, 1 in 344; Dresden, 1 in 466; Rome, 1 in 481; Naples, 1 in 791; St. Petersburgh, 1 in 3,133; Madrid, 1 in 3,350; and Grand Cairo, 1 in 30,714.

Cairo, 1 in 30,714. In New-Hampshire, when the population did not exceed 280,000, the number of luna-In New-Hampsure, when the population did not exceed 280,000, the number of lonatics was estimated at 600; in Connecticut, in a population of 298,000, at 700; in Massachusetts, with a population of about 612,000, there were 1,000; in Virginia, calculating the population at 1,200,000, it was thought, that there were, in 1838, not fewer than from 600 to 700 insane; in Pennsylvania, with a population not exceeding 800,000, there are supposed to be 2,000 insane, 1,200 of whom are idiots and 800 insane; in Maryland, by the late census, with a population of 467,567, there are 340 idiots and insane whites at private and public charge. at private and public charge, and 136 colored at private and public charge.

